

7. **Assignment**

- ☒ An assignment of the invention to SCIMED Life Systems, Inc.
- ☐ is enclosed. A separate:
- ☐ "Cover Sheet for Assignment (Document) Accompanying New Patent Application" is enclosed.
- ☐ Form PTO-1595 is enclosed.
- ☒ was made in prior application No. 09/487,943, filed on January 19, 2000.
- ☒ A copy of the assignment (and any recordation cover sheet) is enclosed.
- ☐ will follow.
- ☐ Not enclosed.

8. **Request That Application Not Be Published Pursuant to 35 U.S.C. 122(b)(2)**

- ☐ Pursuant to 35 U.S.C. 122(b)(2), Applicant(s) hereby requests that this patent application not be published pursuant to 35 U.S.C. 122(b)(1). Applicant hereby certifies that the invention disclosed in this application has not and will not be the subject of an application filed in another country, or under a multilateral international agreement, that requires publication of applications 18 months after filing of the application.

**Warning**

An applicant who makes a request not to publish, but who subsequently files in a foreign country or under a multilateral international agreement specified in 35 U.S.C. 122(b)(2)(B)(i), must notify the Director of such filing not later than 45 days after the date of the filing of such foreign or international application. A failure of the applicant to provide such notice within the prescribed period shall result in the application being regarded as abandoned, unless it is shown to the satisfaction of the Director that the delay in submitting the notice was unintentional.

**9. Fee Calculation (37 C.F.R. 1.16)**

Utility Application (37 C.F.R. 1.16(a))

Basic Fee \$710.00

**FEES FOR CLAIMS AS FILED**

Number filed	Number extra	Rate		
Total Claims (37 C.F.R. 1.16 (c))	1 - 20	= 0	x \$ 18.00	= \$ 0.00
Independent Claims (37 C.F.R. 1.16(b))	1 - 3	= 0	x \$ 80.00	= \$ 0.00
Multiple Dependent Claims (37 C.F.R. 1.16(d))		+ \$ 270.00	=	\$ 0.00
Fee Calculation for Extra Claims				\$ 0.00

- ☐ Amendment canceling extra claims enclosed.
- ☐ Amendment deleting multiple-dependencies enclosed.

Total Filing Fee Calculation **\$ 710.00**

**10. Small Entity Statement**

- ☐ Small entity status is claimed under 37 C.F.R. 1.27.

Filing Fee Calculation (50% of Filing Fee calculated in Item 9 above)

\$

**11. Fee Payment**

- ☐ Not enclosed. No filing fee is to be paid at this time.
- ☒ Enclosed:

- ☒ Basic filing fee (Item 9 or 10 above) **\$ 710.00**
- ☐ Fee for recording Assignment  
\$40.00 (37 C.F.R. 1.21(h)) \$
- ☐ Processing and retention fee  
\$130.00 (37 C.F.R. 1.53(d) and 1.21(l)) \$

Total fees enclosed **\$ 710.00.**

12. Method of Payment of Fees

- ☒ Check in the amount of \$ 710.00.
- ☐ Charge Deposit Account No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_.  
A duplicate of this transmittal is enclosed.

13. Authorization to Charge Additional Fees

- ☒ The Commissioner is hereby authorized to charge the following additional fees by this paper and during the entire pendency of this application to Deposit Account No. 08-2461:
- ☒ 37 C.F.R. 1.16(a), (f), or (g) (filing fees)
- ☒ 37 C.F.R. 1.16(b), (c), and (d) (presentation of extra claims)
- ☒ 37 C.F.R. 1.16(e) (surcharge for filing the basic fee and/or declaration at a date later than the filing date of the application)
- ☒ 37 C.F.R. 1.17 (application processing fees)

A duplicate of this transmittal is enclosed.

14. Instructions as to Overpayment


- ☒ Credit Deposit Account 08-2461. ☐ Refund.

15. Correspondence Address

Please address all correspondence to:

Daniel A. Scola, Jr.  
HOFFMANN & BARON, LLP  
6900 Jericho Turnpike  
Syosset, New York 11791

Telephone: (973) 331-1700  
Fax: (973) 331-1717

  
\_\_\_\_\_  
Mark E. Baron  
Registration No. 46,150  
Attorney for Applicant(s)

- ☐ Customer Number or Bar Code Label: